



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES

DIVISION OF PROCUREMENT SERVICES

STATE OF MAINE

PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$5,000 submitted to the Division of Procurement Services.

INSTRUCTIONS: Please provide the requested information in the white spaces below. All responses (except signatures) must be typed; no hand-written forms will be accepted. See the guidance document posted with this form on the Division of Procurement Services intranet site (Forms page) for additional instructions.

PART I: OVERVIEW			
Department Office/Division/Program:		Maine State Museum	
Department Contract Administrator or Grant Coordinator:		Sheila McDonald	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ \$10,000	Advantage CT / RQS #:	20220216*1893
CONTRACT	Proposed Start Date:	3/15/2022	Proposed End Date: 12/30/2022
AMENDMENT	Original Start Date:		Effective Date:
	Previous End Date:		New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Cecile Design Studio Yarmouth, Maine 04096	
Brief Description of Goods/Services/Grant:		Creation website for Maine Primary Source sets that is easily navigated by teachers and updated by sponsoring state agencies	

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Check the box below for the justification(s) that applies to this request. (Check all that apply.)			
<input type="checkbox"/>	A. Competitive Process	<input type="checkbox"/>	G. Grant
<input type="checkbox"/>	B. Amendment	<input type="checkbox"/>	H. State Statute/Agency Directed
<input checked="" type="checkbox"/>	C. Single Source/Unique Vendor	<input type="checkbox"/>	I. Federal Agency Directed
<input type="checkbox"/>	D. Proprietary/Copyright/Patents	<input type="checkbox"/>	J. Willing and Qualified
<input type="checkbox"/>	E. Emergency	<input type="checkbox"/>	K. Client Choice
<input type="checkbox"/>	F. University Cooperative Project	<input type="checkbox"/>	L. Other Authorization

Please respond to ALL of the questions in the following sections.

PART III: SUPPLEMENTAL INFORMATION

1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.

Website design services, using WordPress and Divi Builder, are necessary for the provision and accessibility of Maine Primary Source Sets, developed cooperatively by the Maine State Museum, Maine State Library, and Maine State Archives under the domain name Mainesharedhistory.org. Because the primary source sets are a joint venture, with their own unique identity, the web-based materials, which must also be jointly administered, managed, and updated, cannot realistically reside within an existing state agency site.

[Click or tap here to enter text.](#)

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.

The selected vendor has experience working with WordPress and Divi Builder and has worked on other websites that have had the same requirements for easy public use and navigation, as well as the capacity for change and addition by people who are not website development professionals. The selected vendor has demonstrated the ability to develop successful user interfaces and work with non-website development professionals to assure simple processes for updating content. The contractor is willing, qualified, and able to do this work within the schedule required.

[Click or tap here to enter text.](#)

3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.

The vendor estimated the costs for this work. The Maine State Museum has worked with the vendor previously and determined that the costs are fair and reasonable.

4. Describe the plan for future competition for the goods or services.

Other vendors will be contacted as other website development needs and projects develop.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)

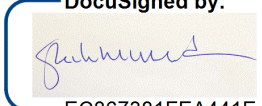
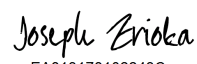
Does this request utilize ARPA/MJRP funds?

☐ Yes – If Yes, please attach the approved Business Case(s).

☒ No – If No, proceed to Part V.

PART V: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	DocuSigned by:  EC867381FEA441E		
Typed Name:	Sheila McDonald, Deputy Museum Director	Date:	2/17/2022
Signature of DAFS Procurement Official:	DocuSigned by:  EA813178102243C		
Typed Name:	Joseph Zrioka	Date:	2/22/2022

